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APPLICANTS

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** CONTINUING DATA ***** AHP

** FOREIGN APPLICATIONS ***** AHP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Verified and Acknowledged	<u>AHP</u> Examiner's Signature	<u>AHP</u> Initials			

ADDRESS

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TITLE

Diascia plant named 'Kiedione'

FILING FEE RECEIVED 530	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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